

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		1-18-00
O.I.P.E. CLASSIFIER		12	2/2
FORMALITY REVIEW	GW	64934	2-8-00
RESPONSE FORMALITY REVIEW	EW	64934	3-28-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	1/18/00
2	1/18/00
3	1/18/00
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Claim	Date
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If more than 150 claims or 10 actions  
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